

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION

In re: PATENT APPLICATION of:

Inventor(s): JENDICK

Appln. No.: 09 412,362

Series Code ↑ Serial No. ↑

Filed: October 5, 1999

Title: METHOD AND APPARATUS FOR
MANUFACTURING MARKED ARTICLES
TO BE INCLUDED IN CANS

Group Art Unit 3721

Examiner: L. Huynh

Atty. Dkt. P 256642

2000182

M#

Client Ref

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DO NOT USE FOR PROVISIONAL,
DIVISIONAL, CIP OR DESIGN
APPLICATIONS, OR REEXAMINATION OF
PATENTS

Hon. Commissioner of Patents
Washington, D.C. 20231

Date: March 14, 2003

Sir:

REQUEST FOR CONTINUED EXAMINATION (RCE) UNDER RULE 114

Please continue the examination of this application.

PREREQUISITES

This application was filed on/after June 8, 1995, is not abandoned, and no court action has been filed, or if filed, it has been terminated.

An issue fee **has not been** paid (unless a petition under Rule 313(c)(2) is also being filed -- see item 4 below).

Prosecution has been closed as defined in Rule 114(b).

Reply to any outstanding action must be enclosed or previously filed.

This application is entitled under Rule 114 to withdrawal of any outstanding finality or of any allowance plus a new action by the Examiner. Consideration on the merits of each submission (e.g., IDS, Amendment, new arguments, new evidence, but not appeal/reply briefs themselves) filed herewith is respectfully requested.

Please consider the following before the next Official Action:

1. Please ☐ enter ☐ do not enter the Amendment filed
2. ☒ The enclosed new Amendment
3. ☐ Consider the arguments in the appeal brief filed ___ and reply brief filed
4. ☐ The issue fee has been paid, but this RCE is based on Rule 313(c)(2). See enclosed petition.
5. ☒ The enclosed Information Disclosure Statement
 - ☒ IDS Letter ☐ Cited Appln ☐ Foreign Search Report/OA
 - ☒ PTO-1449 ☒ Cited Documents
6. ☒ Please suspend action under Rule 103(c) for a period of 3 months (3 mos. Max) for which charge the required \$130 fee (fee code 098) to our Deposit Account (see below).
7. Petition is hereby made to extend the **original** due date of 12/17/2002 to cover the date this Request is filed. **PLEASE CHARGE** the requisite fee to our Deposit Account (see below)

| | |
|---------|-------------------|
| (1 mo) | \$110/\$55 |
| (2 mos) | \$410/\$205 + 930 |
| (3 mos) | \$930/\$465 |
8. **PLEASE CHARGE** the Rule 17(e) (RCE) filing fee of ☒ \$750 (lg. ent.) ☐ \$375 (sm. ent.) plus any deficiency and any other fee due now or later to our Deposit Account No. 03-3975 under Order No. 009521 / 0256642

NOTE: Rule 17(e) filing fee Cannot be deferred!
NO CLAIMS FEE REQUIRED unless you are adding claims by box 2 Amendment in which case cover this with PAT-120.

Pillsbury Winthrop LLP
Intellectual Property Group

P.O. Box 10500
McLean, VA 22102

By Atty: Paul T. Bowen

Reg. No. 38009

(703) 905-2000
Atty/Sec: PTB/EED

Sig:

Fax: (703) 905-2500
Tel: (703) 905-2020

NOTE: File this Request (plus enclosures, if any) in duplicate and with PTO receipt (PAT-103A)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09/4/2362

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

| | | |
|-----------------------------------------------------------|---------------|--------------|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 51 minus 20 = | * — |
| INDEPENDENT CLAIMS | 17 minus 3 = | * — |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 370.00 |
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL | |

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 740.00 |
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL | |

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | MINUS | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|-------------------------------------------------------------------------|----------------------------------|-------|------------------------------------|---------------|
| Total | * 51 | Minus | ** 46 | = 5 |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL ADDIT. FEE | |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | MINUS | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|-------------------------------------------------------------------------|----------------------------------|-------|------------------------------------|---------------|
| Total | * | Minus | ** | = |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL ADDIT. FEE | |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | MINUS | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|-------------------------------------------------------------------------|----------------------------------|-------|------------------------------------|---------------|
| Total | * | Minus | ** | = |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.